



Diabetes *In-control* **NOW!**

Inside This Issue

Welcome letter	1
Steps to Diabetes Control ..	2-3
Nutrition Corner	4-5
Who's Who	6
Research Focus	7
Diabetes Institute	8

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Letter from the Director of the Diabetes Institute

Dear Readers,

Welcome to Diabetes In-control NOW! the first newsletter of the Walter Reed Health Care System Diabetes Institute. This newsletter will be published four times a year. Our goal is to provide updates and practical information to the person with diabetes and to help you manage diabetes more effectively. Physicians, nurse practitioners, diabetes educators, nurses, dietitians, pharmacists, psychologists, and exercise physiologists within the Diabetes Institute will write the articles. Each of these healthcare professionals has expertise in diabetes management and/or research.

As a leader in military health care for active, retired, and dependent persons with diabetes, the Diabetes Institute strives to provide cutting edge diabetes care, education, and research. Endocrinologists and nurse practitioners provide individualized and comprehensive care to adults with diabetes at Walter Reed Army Medical Center, DeWitt Army Community Hospital, the Family Health Centers of Fairfax and Woodbridge, the Radar Family Practice Center, and Kimbrough Ambulatory Care Center. In 2003 the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) awarded the Diabetes Institute the Disease-Specific Care Certification for excellence in diabetes care and education. Walter Reed Army Medical Center was the first military treatment facility to receive this award. Diabetes education is an essential component of effective diabetes treatment. The diabetes self management education programs throughout the Walter Reed Health Care System are taught by physicians, nurses, dietitians, psychologists, and exercise physiologists who specialize in diabetes and who want to help you achieve your best. Our diabetes self-management education programs are recognized by the American Diabetes Association (ADA) for meeting the Standards of Care for Diabetes Education.

We hope you enjoy this first issue of the WRHCS Diabetes Institute's Diabetes In-control Now! Our mission is your health!

Sincerely,

Robert A. Vigersky, COL MC
Medical Director, Diabetes Institute
Walter Reed Health Care System.

Your Diabetes Clinics

Washington DC

**Walter Reed
Army Medical Ctr.**
Endocrinology
202-782-6750

Internal Medicine
202-782-1952

Virginia

**DeWitt Army Community
Hospital**
703-805-0714

**Family Health Center of
Fairfax**
703-970-4228

Rader Family Practice Center
703-696-2977

**Family Health Center of
Woodbridge**
703-576-1364

Maryland

**Kimbrough Ambulatory Care
Center**
301-677-8496

Steps to Diabetes Control

There are four steps you can take to control your diabetes and live a long and active life.

1. Learn about diabetes.
2. Know your diabetes ABCs
3. Manage your diabetes.
4. See your care providers regularly.

Diabetes is a serious disease. It affects almost every part of the body. A team of people in the WRHCS are available to help you take care of your diabetes:

- Doctors and nurse practitioners
- Diabetes educators
- Nurses
- Dietitians
- Ophthalmologists and Podiatrists
- Pharmacists
- Dentists
- Mental health and social workers
- Friends and family

It is important that you talk to your health care team about your special needs and to work with your team to manage your diabetes.

Once each year, get a...

- Cholesterol check
- Dilated eye exam to check for eye problems
- Complete foot exam to check on foot health
- Urine and blood tests to check for kidney problems
- Flu shot

STEPS TO CONTROL

1. Learn about diabetes:

Diabetes means that your blood glucose (blood sugar) is too high. There are two main types of diabetes.

Type 1 diabetes—the body does not make insulin. Insulin helps the body use glucose from food for energy. People with Type 1 need to take insulin every day. Type 1 occurs in approximately 10% of the population.

Type 2 diabetes—the body does not make enough or use insulin well. People with Type 2 often need to take pills or insulin. Approximately 90% of the people who have diabetes have Type 2.

All people with diabetes need to eat healthy foods, stay at a healthy weight, and be active every day.

Is Diabetes a serious disease?

Terms such as “a touch of diabetes” or “your sugar is a little high” suggest that diabetes is not a serious disease. That is not correct and these terms should not be used. Diabetes is a serious disease.

Taking care of yourself will help you feel better and avoid complications that result when glucose is not controlled.

Complications:

- Heart disease and stroke.
- Eye disease that can lead to vision problems or blindness.
- Nerve damage that can cause your hands and feet to feel numb or tingle and that can lead to loss of a foot or a leg.



- Kidney problems.
- Gum disease and loss of teeth.

When your diabetes is in good control, you will feel better and you will decrease your risk of developing complications.

Are some people more likely to get diabetes than others?

Some people may have a higher chance of getting diabetes. Ask your doctor if you should be tested for diabetes.

These include people who

- Are age 45 and older
- Are overweight
- Are African American, Hispanic/Latino American, Asian American or Pacific Islander, or American Indian
- Have a parent, brother, or sister with diabetes
- Have high blood pressure (above 140/90)
- Have low HDL (good cholesterol) and high levels of blood fats
- Developed diabetes when pregnant or gave birth to a large baby (over 9 lbs)
- Are active less than three times a week

2. Know the ABCs of diabetes.

Manage your **A1C** (blood glucose or sugar), **B**lood pressure, and **C**holesterol. This will help lower your chances of having a heart attack, a stroke, or other problems relating to diabetes.. These are called the **ABCs** of diabetes.

A is for A1C.

A1C is a blood test that gives you an overall “snapshot” of blood glucose control for the past 3 months.

It should be checked at least twice a year.

The goal for most people is less than 7.

High blood glucose levels can harm your kidneys, feet, and eyes.

B is for blood pressure.

The goal for most people is 130/80.

High blood pressure makes your heart work too hard. It can cause heart attack, stroke, and kidney disease.

C is for LDL cholesterol.

The LDL goal for most people is less than 100.

Bad cholesterol, or LDL can build up and clog your blood vessels. It can cause a heart attack or a stroke.

Know Your ABCs

- A1C
- Blood pressure
- Cholesterol (LDL)

Know your goals.

3. Manage your diabetes.

Many people avoid the long-term problems of diabetes by taking good care of themselves. Work with your health care team, friends, and family to make healthy lifestyle choices and reach your ABC goals.

- Follow your diabetes food plan. If you do not have one, ask your health care team about it.

- Eat the right portions of healthy foods such as fruits and vegetables, (5 to 9 servings a day), fish, lean meats, dry beans, whole grains, and low-fat or skim milk and cheese.
- Exercise at least 30 minutes 5 days/week.
- Stay at a healthy weight by being active and eating the right amounts of healthy foods.
- Stop smoking—seek help to quit.
- Take medicines the way your care provider tells you. Ask if you need aspirin to decrease your risk of heart attack or stroke.
- Check your feet every day for cuts, blisters, red spots, and swelling. Call your health care team right away about any sores that do not heal.
- Brush your teeth and floss every day to avoid problems with your mouth, teeth, or gums.
- Check your blood glucose at least once a day.

Work with your health care team to manage your diabetes and stay healthy.

4 Get regular check-ups.

See your health care team at least twice a year to find and treat problems early.

At each visit expect your care provider to:

- ✓ Blood pressure
- ✓ Weight
- ✓ Feet

Two times each year:

- ☐ Check your A1C.
- ☐ See your dentist. Tell your dentist you have diabetes.

REMEMBER:

Know the diabetes ABCs.

Know **YOUR** ABCs.

Find out what you can do to meet the ABC goals.

How Important are Your Eyes?

Diabetic retinopathy is a significant cause of blindness or impaired vision in people with diabetes. The American Diabetes Association, the Dept. of Defense, the Veterans Health Administration, and the American Association of Clinical Endocrinologists recommend yearly dilated eye exams to determine presence of retinopathy. New technology using a specialized camera, however, may soon replace the need for a yearly dilated eye exam.

The Diabetes Institute is providing a non-invasive procedure that uses this specialized camera to take images of your eyes. The images will then be sent via the Internet to the Walter Reed Dept. of Ophthalmology for evaluation. Your doctor or nurse practitioner will receive the results and inform you. The procedure can be performed at WRAMC, DeWitt, Fairfax, and Kimbrough.

Nutrition Corner:

Eating with Diabetes

What, when, and how much food you eat and drink are important in helping to control your diabetes and in giving your body all of the nutrients it needs to stay healthy. A registered dietitian at your medical treatment facility can help you to develop a meal plan that is right for you. Please call the Diabetes Clinic closest to you to schedule an appointment. You do not need a referral to make the appointment with a dietitian. Ideally, you should see a dietitian at least once a year for a "nutrition" check up. There are many changes in diabetes and eating and a dietitian can help keep you informed of the best ways to eat for you.

Here are some basic tips to get you started until you see a dietitian.



1. Eat breakfast, lunch and dinner. Make your meals low in fat and high in fiber.
2. Eat small snacks between meals, if you get hungry.
3. Eat a variety of foods every day.
 - a. Choose whole grain foods such as high fiber cereals, whole wheat bread with at least 2g fiber per slice, beans, peas, and brown rice.
 - b. Eat fruit twice a day; fresh, canned in light syrup or juice, or dried fruit. Limit fruit juices.
 - c. Eat at least 2 cups of non-starchy vegetables each day.
 - d. Eat or drink 2-3 servings of low fat dairy products each day.
 - e. Choose lean meat, fish, and poultry.
 - f. Choose unsaturated fats such as olive or canola oil, tub margarine, salad dressings, olives, nuts, and seeds. To help you maintain your weight, use small amounts of added fats and limit your intake of fried foods.
4. Be consistent in your serving sizes and spread your food throughout the day. Eating too much or too little can cause your blood sugar to not be controlled.
5. Drink plenty of low calorie beverages. Avoid regular soda (it is OK to drink diet soda), fruit drinks, and sugar-sweetened beverages.
6. It is OK to eat high-sugar foods and desserts occasionally, but control how much you eat at one time. These foods are high in calories and can cause your blood sugar to go too high and cause you to gain weight.
7. Keep a record of what you eat for 3 days and review it to see if on most days you are eating a variety of low fat, high fiber foods. It's also a good idea to bring a food record to your appointments with your diabetes provider and to your appointment with the dietitian.
8. Follow the plate method for your meal plan. It's a simple way to help you eat a variety of foods while controlling portion sizes. You use your hands to help you measure portion sizes so you can use this method when eating at home or when eating out.
9. Carbohydrates are NOT the enemy. Your body needs carbohydrates for energy. But, it is important to control how much carbohydrate you eat at a meal or a snack. A good place to start is to eat between 45-75g carbohydrates each meal. Try to keep the amount you eat consistent within 10g of carbohydrate. Use labels to help you figure out the amount of carbohydrate in a food or the basic guidelines given to you on the plate method.
10. Test your blood sugar 2 hours after eating a meal or a snack to determine how that food affected your blood sugar. The goal is for your blood sugar to be less than 140-180 mg/dl 2 hours after eating.

What's for Breakfast?

Fruit:

The size of your "Fist" (Fresh or canned packed in water, juice, or light syrup) (30g Carbohydrate)

Plate Method: Breakfast

Fat Free or 1% Milk or Light Yogurt:

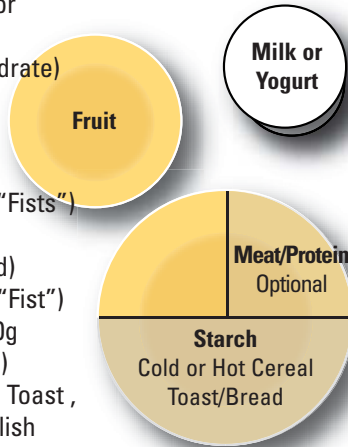
1 cup (drink or eat at least twice a day) (12-22g Carbohydrate)

Starch:

1 1/2 cups (2 "Fists") Cold cereal (unsweetened)
OR; 1 cup (1 "Fist") Hot cereal (30g Carbohydrate) and/or 1 slice Toast, Bagel, or English Muffin (15-30g Carbohydrate)

Meat/Protein:

Lean ham, Eggs, Canadian Bacon, Lowfat Cheese, Peanut Butter, Cottage Cheese -- Occasionally (No Carbohydrate)



Either eat all food at breakfast or save some food for morning snack

What's for Lunch and Dinner?

Fruit:

The size of your "Fist" (Fresh or canned packed in Water, Juice, or Light Syrup) (30g Carbohydrate)

Plate Method: Lunch/Dinner

Fat Free or 1% Milk or Light Yogurt:

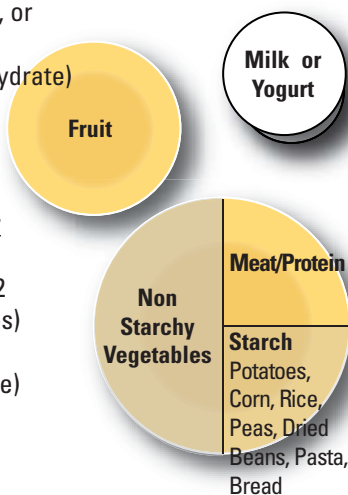
1 cup (drink or eat at least twice a day) (12-22g Carbohydrate)

Non-starchy

Vegetables: Eat at least 2 "fists" (2 cups) (Very little Carbohydrate)

Meat/Protein:

The Size of the Palm of Your Hand. Choose: Chicken, Turkey, Fish, Beef, Pork, Tofu, Cottage Cheese, Lowfat Cheese, Peanut Butter, (No Carbohydrate)



Starch:

The size of your "Fist" (1 Cup) (30g Carbohydrate)

Either eat all food at one meal or save some food for a snack between meals

Diabetes Classes

DeWitt Family Health Center

703.805.9310

Wednesday Evening

2nd & 4th Wednesdays every other month from 6:00 pm – 9:00 pm
March, May, July, Sept & November

Thursday Morning

Every Thursday from 9:00 am – 12:00 noon

Fairfax Family Health Center

703.846.9503

Thursday Morning

1st and 3rd Thursdays of each month from 9:00 am – 11:30 am

Pre-diabetes Class

1st Thursday in April, June, August, October, December from 1:00 pm – 4:00 pm

Woodbridge Family Health Center

703.550.2671

Monday Evening

1st and 3rd Monday of each month from 5:30 pm – 7:30 pm

Tuesday Morning

1st and 3rd Tuesday of each month from 9:00 am – 11:30 am

Pre-diabetes Class

4th Monday of each month from 2:00 pm – 5:00 pm

Walter Reed Army Medical Center

202.782.3308

Wednesday

2nd and 3rd Wednesdays of each month from 8:15 am – 3:30 pm

Weekends

Dates to be announced

Who's Who

Lucia Novak is a member of the Diabetes Institute team at Walter Reed Army Medical Center (WRAMC). She was born and raised in Pittsburgh, Pennsylvania. Lucia has been married for 13 years to her high school sweetheart and soul-mate, Kevin Novak. He is employed with The Library of Congress as the Director of Web Services and Educational Outreach. Lucia and Kevin have two boys – Coty, 8 and Zachary, 5. She and her family reside in Silver Spring, MD. When the boys don't have her running from one activity to another, Lucia enjoys getting lost in the world of a good fictional book.

When she was a senior in high school, she was awarded an Army ROTC scholarship and attended Duquesne University in Pittsburgh. In 1991, she successfully earned her Bachelor of Science in Nursing and received her commission into the Army Nurse Corps. Her first tour of duty was as a medical-surgical nurse at WRAMC. She completed her service obligation and was granted an honorable discharge from the Army in 1999. That same year, she achieved a Master of Science in Nursing at The Catholic University in Washington, DC. She has been practicing as a board certified nurse practitioner of adult health for the last six years.

Lucia has been with the Diabetes Institute since 2000. Her return to WRAMC was motivated by her deep-felt patriotism and desire to serve the members of the Armed Forces. She also remarks with a smile, "Living all of four miles from here, the commute isn't all that bad either."

Lucia's decision to work in the field of diabetes as a nurse practitioner was fueled by her experience as a nurse and her belief that this is an area where she could make the greatest impact on patients. She believes there are two main roles of the nurse in the complicated web of health care. The first is to be a patient advocate who will assist the patients to safely navigate through the health care system so that their health needs are met in a safe and timely manner. The other and perhaps more important role is that of educator. Patient education is a vital part of health maintenance. Unfortunately, due to time constraints and/or insufficient



resources, patient education is often the piece that is incorporated the least. "Becoming a nurse practitioner has enabled me to capitalize on the skills that I have developed in the course of my 14 years of being a nurse. With my knowledge of the health sciences, understanding of human nature, and passion to assist others, I believe I am in a great position to make a tremendous impact on individuals and families living with diabetes. My goal is to enable them to live longer, more fulfilled lives."

The greatest challenge she sees before her is to somehow convince people that they **MUST** make time to do the things that will keep them healthy. One of the biggest hurdles for patients is lack of time. They are working full-time jobs, not quite willing/ready to retire (if of age), and running several households as they tend to their spouse/children/grandchildren/parents. They give their all to everyone around them and do not have enough left at the end of the day for themselves. Frequently Lucia will hear, "I don't have time to check my blood sugars, exercise, or cook a proper meal. If I stay home when I don't feel well, I will fall behind at work." Unfortunately, this is the reality that we all face. Yet, if time is not invested into being healthy, it will be spent on being sick. The cost is far greater than we are able to afford. What people often fail to realize is that with small, subtle changes in their daily lives, the rewards over time will multiply. "They have to stick with it, and need to know the Diabetes Institute team is available to help them along the way."

The many letters received by the Hospital Commander and the Chief of the Endocrinology Service acknowledge Lucia's dedication to WRAMC and commitment to her patients. She is considered an important asset to the Diabetes Institute and a valuable member of our team.

Research Focus

The Diabetes Institute is at the forefront of research that is exploring new and better ways to manage diabetes and its complications. Individuals who volunteer to be in a study may gain access to promising new therapies, contribute to medical research which may result in better diabetes care and technology, and receive the specialized medical care the study provides. The Diabetes Institute is currently recruiting patients for the following studies.



Diabetes Autonomic Neuropathy Study (DAN)

Diabetic neuropathy is a common complication of diabetes and ultimately affects about half of all patients with diabetes.

Diabetic Autonomic Neuropathy (DAN) involves the nerves of the autonomic or involuntary nervous system and is a risk factor for digestive disorders and sexual problems. DAN may also be a risk factor for cardiovascular diseases, such as heart attack and stroke.

The Diabetes Institute is now recruiting adults who have had Type 1 diabetes for > 5 years or Type 2 diabetes to participate in the DAN research study.

The DAN research study uses an Autonomic Nervous System monitor, a noninvasive and painless method, to measure changes in your heart rate and blood pressure in sitting and standing positions. Although no benefit is guaranteed, the possible benefit to you for participating in this study is the early detection of otherwise unknown cardiovascular disease.

Testing for diabetic autonomic neuropathy is being conducted at all the WRHCS clinics.

For More Information Please Contact:
Todd L. Woods, Project Officer
202-782-3310

Inhaled Insulin Study

If you are a military health care beneficiary between the ages of 18 and 80 years who is taking more than one oral medication to treat your Type 2 diabetes, but still don't have your blood sugars under control you may be eligible to receive investigational inhaled insulin in a research study.

Qualified participants will receive study-related exams from diabetes experts, as well as nutritional counseling, laboratory tests, a home blood sugar testing machine and all study medications. The study will last 1 year and requires 17 clinic visits over that time. It is possible that your blood sugar may improve as a result of this study. However, no benefit can be guaranteed.

If you currently smoke, have known asthma, other respiratory problems, or have a severe medical condition, you will not be eligible to participate.

The study is being conducted in the Endocrinology Clinic at Walter Reed Army Medical Center under the direction of the Principal Investigator, COL Robert A. Vigersky, MC.

For More Information Please Contact:
Dr. Vlad Stanila, Project Officer
202-782-5226



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Diabetes In-control NOW! Is published four times each year by the Walter Reed Health Care System Diabetes Institute. This newsletter is designed to provide timely and useful information that we hope will help those with diabetes and their families live long and live strong.

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Our Mission ▶ **Your Health**

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Walter Reed Health Care System
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